## DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814 (916) 323-0270

March 29, 1982



ALL-COUNTY LETTER NO.82-28

ALL COUNTY WELFARE DIRECTORS

ALL COUNTY WELFARE FISCAL OFFICERS

ALL COUNTY AUDITORS

ALL COUNTY ADMINISTRATIVE SERVICE OFFICERS

SUBJECT:

COUNTY WELFARE ADMINISTRATIVE EXPENSE CLAIM

REFERENCE:

This is to provide claiming instructions for the January - March 1982 quarter. Included are instructions related to: Refugee Resettlement - Unaccompanied Minors, Cuban Haitian Entrant - Unaccompanied Minors, Child Care and Development Program, WIN, Social Services Time Study Summary, Cost Distribution Reports and Indirect Cost Allocation Plans.

The following forms are to be used for the January - March 1982 quarter claim and are being forwarded to counties separately:

FORM	REVISION DATE	FORM	REVISION DATE
DFA 325.1	10/81	DFA 327.8	1/82
DFA 325.1a	7/81	DFA 327.8A	2/82
DFA 325.2	7/81	DFA 327.8B	2/82
DFA 325.3	10/81	DFA 327.8C	2/82
DFA 325.4	1/81	DFA 403	7/81
DFA 327.1	1/82	DFA 50	7/79
DFA 327.2	10/81	DFA 419	7/81
DFA 327.3	7/81	DFA 394	10/81
DFA 327.4	1/82	DFA 46	1/82
DFA 327.5	10/81	DFA 47	1/82
DFA 327.6	1/82	DFA 323	1/82
DFA 327.7	1/82	DFA 856	10/81



### Refugee Resettlement/Cuban Haitian - Unaccompanied Minors

ACL 82-05 notified counties that the Federal Refugee Cash and Medical Assistance appropriation will be the funding source for the costs of providing social services to Refugee Resettlement/Cuban-Haitian Unaccompanied Minors. Therefore, effective with the January - March 1982 quarter, the administrative expense claim has been revised to include these programs.

#### Child Care and Development Program

As outlined in ACL 82-08, dated January 28, 1982, effective with the January - March 1982 quarter, the administrative claim has been revised to include the Child Care and Development Program administered by the State Department of Education (DOE). Those counties providing Child Care and Development services pursuant to a standard agreement with DOE are to report the related administrative costs determined through the claiming process to DOE via the CD 9501-CWD, Fiscal Report for Child Care and Development Programs.

#### WIN Child Care Data - DFA 396

Due to a recent change in WIN federal reporting requirements, effective with the January - March 1982 quarter, counties are no longer required to complete and submit the DFA 396 - WIN Child Care Data, as part of the administrative expense claim.

### Social Service Time Study Summary (DFA 47)

Effective with the January - March 1982 quarter, the DFA 47 has been revised to separately identify social worker hours and supervisor hours for the Adoptions and Licensing Programs.

#### DFA 327.8A, DFA 327.8B and DFA 327.8C - Staff and Cost Distribution Reports

Effective with the January - March 1982 quarter, counties are instructed to complete and submit the DFA 327.8A, DFA 327.8B and DFA 327.8C, Staff and Cost Distribution Reports (formerly the DFA 327.7A and DFA 327.7B), as part of the County Administrative Expense Claim. As a reminder, the claim is due in this office by the 12th working day after the end of each quarter.

## Indirect Cost Allocation Plans (A-87; FMC 74-4)

This is to remind counties that prior approval by the Department of Health and Human Services (DHHS), Division of Cost Allocation (DCA) is still required for counties having Super Agency or Umbrella type organization structures encompassing the county welfare department before claiming Federal and State reimbursement. This is particularly critical for counties in the process of developing Super Agencies. Costs claimed by Umbrella/Super Agency counties must be developed annually by way of an agency Indirect Cost Rate Proposal (ICRP). Copies of the proposal must be submitted to both DCA and the Department of Social Services (DSS), Fiscal Policy and Procedures Bureau (FPPB). This process will allow for a concurrent review by FPPB in providing DCA with comments and recommendations regarding a county's proposal within 60 days of the submission date. The responsibility of negotiating, approving and resolving issues remains with DCA.

The proposal should cover a fiscal year period and be submitted on or before January 1 of the year preceding the fiscal year it is to be used. Only those costs attributable to welfare as determined by an approved ICRP will be considered eligible for reimbursement.

Counties should submit their Umbrella/Super Agency proposals to:

Mr. David Low, Director Division of Cost Allocation Department of Health and Human Services 50 United Nations Plaza, Room 53 San Francisco, CA 94102

Attention: Dick Onstad

and

Department of Social Services Financial Management Services Branch Fiscal Policy and Procedures Bureau 744 P Street, M/S 8-100 Sacramento, CA 95814

## Claiming Form Changes

The changes are detailed below:

- 1. DFA 327.1 Social Services Program Distribution Adds a line for Refugee Resettlement Unaccompanied Minors, Cuban Haitian Unaccompanied Minors and Child Care and Development Program.
- 2. DFA 327.4 Services Modification Worksheet Revised footnotes in Part II, Adoption and Maternity Care to coincide with the September December 1981 claim changes.

# Claiming Form Changes (cont'd)

- 3. DFA 327.6 Social Services Fund Distribution Report Deletes two lines from the State Use Only lines, adds a line each for Refugee Resettlement Unaccompanied Minors, Cuban Haitian Unaccompanied Minors and the Child Care and Development Program.
- 4. DFA 327.7 Eligibility and Nonservices Fund Distribution Report Revised footnote number 1 requiring social services costs for Refugee/Cuban Haitian Unaccompanied Minors to be included with Refugee/Cuban Haitian Non-AFDC costs.
- 5 DFA 327.8 Total Expenditure Fund Distribution Report Adds a line for the Child Care and Development Program.
- 6. DFA 47 Social Services Time Study Summary and Program Allocation Ratios Adds a line for Refugee Resettlement Unaccompanied Minors, Cuban Haitian Unaccompanied Minors, Child Care and Development Program and provides for the separate identification of SW/SW supervisor hours for the Licensing and Adoption Programs.
- 7. DFA 323 Eligibility Time Summary and Program Allocation Ratios Deleted the Medi-Cal, Social Security Number Validation line and added a line for Medi-Cal Dual Choice.

All questions concerning this letter should be directed to the Fiscal Policy and Procedures Bureau at (916) 445-7046 or ATSS (8) 485-7046.

JAMES H. GOMEZ Deputy Director

Administration

cc: CWDA